## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

I hereby certify that this correspondence is being deposited with the U.S. Postal Service with sufficient postage as first class mail in an envelope addressed to Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on April 11, 2005.

Marilyn R. Khorsandi Marilyn R. Khorsandi

**Applicant** 

Paul Bilibin, et al.

Application No. :

09/684,861

Filed

October 6, 2000

Title

Apparatus, Systems and Methods For Determining

Delivery Time Schedules For Each Of Multiple

Carriers

Grp./Div.

3623

Examiner

Beth Van Doren

Docket No.

PSTM0024/MRK

## TRANSMITTAL LETTER

Mail Stop Amendment **Commissioner For Patents** P.O. Box 1450 Alexandria, VA 22313-1450 140 S. Lake Ave., Suite 312 Pasadena, CA 91101 April 11, 2005

## Commissioner:

## Attached are the following:

- 1. FY 2005 Fee Transmittal Form, in duplicate;
- Amendment and Response to Office Action dated January 11, 2005; 2.
- Declaration Under 37 C.F.R. 1.131, with Exhibits A-E; 3.
- Information Disclosure Statement, PTO Form 1449, and 12 cited references and 4. documents;
- Check No. 1886 in the amount of \$230.00 to cover the fee for the Information 5. Disclosure Statement submission and fee for additional Dependent Claim; and
- 6. Return Postcard.

Application No. 09/684,861 Page 2 of 2

The Commissioner is hereby authorized to charge any fees under 37 CFR 1.16 and 1.17 which may be required during the **pendency** of this application to Deposit Account No. 501574. Please show our docket number with any charge or credit to our Deposit Account.

Respectfully submitted,

KHORSANDI PATENT LAW GROUP, ALC

Marilyn R. Khorsandi

Reg. No. 45,744

Customer No. 29524

626/796-2856

MRK/aa Enclosures

PTO/SB/17 (12-04)

Approved for use through 07/31/2006. OMB 0651-0032
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. Complete if Known Effective on 12/8/2004. Application Number 09/684861 Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). 10/6/2000 Filing Date TRANSMITTAL First Named Inventor Bilibin, et al. For FY 2005 Beth Van Doren **Examiner Name** Art Unit 3623 Applicant Claims small entity status. See 37 CFR 1.27 PSTM0024/MRK (\$) 230.00Attorney Docket No. TOTAL AMOUNT OF PAYMENT METHOD OF PAYMENT (check all that apply) X Check Credit Card Money Order None Other (please identify): Deposit Account Name: Khorsandi Patent Law Group, ALC Deposit Account Number: 501574 For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charges fee(s) indicated below, except for the filing fee Charge fee(s) indicated below Credit any overpayments Charge any additional fee(s) or underpayments of fee(s) X under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. FEE CALCULATION 1. BASIC FILING, SEARCH, AND EXAMINATION FEES **FILING FEES** SEARCH FEES **EXAMINATION FEES** Small Entity Small Entity **Small Entity** Fees Paid (\$) Fee (\$) Fee (\$) Fee (\$) Application Type Fee (\$) Fee (\$) Fee (\$) 500 250 200 100 Utility 300 150 Design 200 100 100 50 130 65 200 100 300 150 160 80 Plant 600 300 300 150 500 250 Reissue 'n 0 Provisional 200 100 0 0 **Small Entity** 2. EXCESS CLAIM FEES Fee (\$) Fee (\$) Fee Description 25 Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent 50 Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent 200 100 360 180 Multiple dependent claims **Total Claims** Fee (\$) Fee Paid (\$) **Multiple Dependent Claims** Extra Claims Fee Paid (\$) - 20 or HP = Fee (\$) \$50.00 \$ 50.00 HP = highest number of total claims paid for, if greater than 20 Indep. Claims Extra Claims Fee (\$) Fee Paid (\$) -3 on(HiP) 0 \$200.00 HP = highest number of independent claims paid for, if greater than 3 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41 (a)(1)(G) and 37 CFR 1.16(s). Fee Paid (\$) Number of each additional 50 or fraction thereof **Total Sheets Extra Sheets** (round up to a whole number) \$250.00 \$ 0.00 Fees Paid(\$) 4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount) -0-\$180.00 Other: Information Disclosure Statement SUBMITTED BY Registration No. (626) 796-2856 Telephone Signature horsand Date Marilyn R. Khorsandi Name (Print/Type)

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.